



The Commonwealth of Massachusetts
Division of Professional Licensure
239 Causeway Street □ Boston, MA 02114
www.mass.gov/dpl/boards/el

Board of State Examiners of Electricians
(617)727-9931

NOT TO BE USED BY VOCATIONAL TRADE SCHOOLS

FORM 223

CERTIFICATE OF SCHOOL EXPERIENCE
Application for the Master Electrician or Systems Contractor Exam

To be used for courses taught within Massachusetts
Day or Evening programs

TO THE STATE EXAMINERS OF ELECTRICIANS

THE FOLLOWING IS TO BE COMPLETED BY SCHOOL OFFICIALS

Subject to the penalties set forth in Section 5 of chapter 141 of the General Laws, I subscribe to and vouch for the statement made by me that

_____ completed classroom instruction at
Name of Applicant License number/Class/Type Expiration date

_____ describe course of study– security/fire/light heat of power with hours successfully completed
Name of School

From _____ 20 _____ To _____ 20 _____
Date of Enrollment Date of Completion of Course

IN STATE-APPROVED ELECTRICAL PROGRAM ONLY

_____ Title
Name of Designated School Official - Type or Print

_____ Date
Signature of Designated School Official

IMPRINT SCHOOL SEAL HERE

General laws, Chapter 141

Section 9. Any person making any misstatement as to his or her experience or other qualifications, or any person, firm or corporation subscribing to or vouching for any such misstatement, shall be subject to penalties set forth in Section 5.